



IFW
Attorney Docket No. 81887.0124
Patent Application No. 10/538,165

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re, application of:
HIROYUKI HIDAOKA

Art Unit: Not Assigned
Examiner: Not Assigned

Serial No: 10/538,165

Filed: June 8, 2005

For: WIRELESS COMMUNICATION TERMINAL AND
CONTROL METHOD

I hereby certify that this correspondence
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MAIL STOP Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

01/23/06

Date of Deposit

Diane Zynn

Name

Diane Zynn 01/23/06
Signature Date

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is a preliminary amendment.

- ☒ Enclosed are Replacement Figs 1-6.
☒ No additional fee is required.

The fee has been calculated as shown below:

| | (Col. 1) CLAIMS REMAINING AFTER AMENDMENT | | (Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR | (Col. 3) PRESENT EXTRA* | LG/SM \$ ENTITY FEE | ADD'L FEE DUE |
|--|---|---|---|--|--|------------------|
| TOTAL CLAIMS FEE | 14 | - | 20 ** | 0 | LG=\$50 SM=\$25 | \$ 0 |
| INDEPENDENT CLAIMS FEE | 4 | - | 4 *** | 0 | LG=\$200 SM=\$100 | \$ 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS | | | | | LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180 | \$ 0 |
| ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER) | | | | \$250 FOR EACH ADDITIONAL 50 SHEETS | | \$ 0 |
| Independent Claims: 1, 3, 5, 7 | | | | | TOTAL | \$ 0 |

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge the fee of \$___ for the additional claim fees to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☐ Please charge the fee of \$___ for the extension of time to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. **A copy of this sheet is enclosed.**
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,
HOGAN & HARTSON LLP

By: *Lawrence J. McClure*

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Date: January 23, 2006

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